Oral health care for older adults



What is the Public Health Issue?

Oral health is integral to general health.¹ Over the past several decades, better preventive and therapeutic oral health interventions, including increased use of fluoride, have led to improved oral health in older adults and lower rates of complete tooth loss.¹ However, certain groups of older adults including minorities, low income and the uninsured still suffer disproportionately

Oral health issues for Americans >65 years old:²

- ✓ 30% with complete tooth loss from tooth decay and gum disease
- ✓ Decay: 30% with active, untreated decay³
- ✓ Gum disease: 23% with severe disease
- ✓ Oral cancers
- ✓ Dry mouth due to medications
- ✓ Neurological diseases affecting nerves to mouth

from poor oral health.² Older adults who smoke have seven times the risk of developing gum disease and are also at an increased risk for developing oral cancer.²

For economically disadvantaged older Americans, paying for oral health care services can be difficult. In 1995, only 22% of older Americans were covered by private dental insurance. Medicare only covers limited services needed by hospitalized patients with specific conditions. Medicare does not cover routine dental services, such as preventive care that would include tooth cleaning or screening for oral cancers. Medicaid programs are not required to include dental services for individuals over 20 years of age, and most state programs offer little or no dental coverage for adults. Consequently, the majority of older Americans must pay for oral health care out of pocket.

How is Maine doing?

A state survey conducted in 1999 showed that almost 35% of Maine adults over 65

Healthy People U.S. 2010 related objective: 4

- ✓ Reduce adults 65+ who have lost all their teeth to 20%.
- ✓ Reduce prevalence of smoking in adults to $\leq 12\%$.

years old had lost all their permanent teeth.⁵ In fact, an earlier survey showed that Maine was among the top five states with the highest percentage of older adults experiencing complete tooth loss.⁶ Data collected in 2002 indicated that 30.4% of adults over age 65 reported having lost all of their permanent teeth.⁷ With respect to oral health care coverage, it has been estimated that about 85% of Maine's adults over 65 were without any dental insurance coverage.⁸ Finally, a recent survey indicates that 24% of Maine adults over the age of 18 are current smokers, a prevalence slightly higher than the national average of 23.4 percent.⁹

What is Maine doing?

- Community water fluoridation prevents decay and provides a protective benefit to older adults. In 2004, 84% of the population in Maine on public water systems receives fluoridated water. However, this translates into only about 38.5% of Maine's total population receiving fluoridated water due to the large proportion of Maine citizens who drink water from a private source.
- The Dental Services Development and Subsidy Program provides support to community based dental programs, supporting capacity-building and helping to keep services more affordable to those eligible for their sliding fee scales, i.e., the uninsured or underinsured.
- The Donated Dental Services (DDS) Program of the National Foundation of Dentistry for the Handicapped, in cooperation with the Maine Oral Health Program and the Maine Dental Association, provides free care to eligible elderly and disabled persons.
- The Senior-Dent Program, in cooperation with Area Agencies on Aging and the Maine Dental Association, offers discounted care to seniors who meet income criteria and have no dental insurance.

Strategies for Maine's future:

- ✓ *Continue supporting and funding water fluoridation.*
- ✓ Educate and empower older adults about the benefits of water fluoridation, twice daily brushing with fluoride toothpaste, and quitting smoking.
- ✓ Promote expansion of insurance coverage to provide preventive services for Maine seniors.

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